

MARY JUDE NURSING HOME

9806 WEST LINCOLN AVENUE

WEST ALLIS 53227

Phone: (414) 543-5330

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 51

Total Licensed Bed Capacity (12/31/02): 51

Number of Residents on 12/31/02: 46

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 48

Corporation

Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		41.3
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		41.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		17.4
Day Services	No	Mental Illness (Org./Psy)	45.7	65 - 74	4.3			-----
Respite Care	No	Mental Illness (Other)	10.9	75 - 84	32.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.2	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	2.2		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	17.4	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	17.4		-----	RNs		7.5
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		11.9
Other Services	No	Respiratory	2.2	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	4.3	Male	19.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	80.4	45.7		
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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## Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
Level of Care			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	2	100.0	306			36	100.0	113	0	0.0	0	7	100.0	160	1	100.0	113	0	0.0	0	46	100.0
Intermediate	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0			0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	2	100.0				36	100.0		0	0.0		7	100.0		1	100.0		0	0.0		46	100.0

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Admissions, Discharges, and Deaths During Reporting Period			Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							
			-----							
			% Needing				Total			
Percent Admissions from:			Activities of		%	Assistance of		% Totally	Number of	
			Daily Living (ADL)		Independent	One Or Two Staff		Dependent	Residents	
Private Home/No Home Health			5.7	Bathing		6.5	60.9	32.6	46	
Private Home/With Home Health			0.0	Dressing		21.7	43.5	34.8	46	
Other Nursing Homes			14.3	Transferring		39.1	28.3	32.6	46	
Acute Care Hospitals			77.1	Toilet Use		34.8	32.6	32.6	46	
Psych. Hosp.-MR/DD Facilities			1.4	Eating		71.7	19.6	8.7	46	
Rehabilitation Hospitals			0.0							
Other Locations			1.4	*****						
Total Number of Admissions			70	Continence		%	Special Treatments		%	
Percent Discharges To:			Indwelling Or External Catheter		4.3	Receiving Respiratory Care		0.0		
Private Home/No Home Health			9.5	Occ/Freq. Incontinent of Bladder		60.9	Receiving Tracheostomy Care		0.0	
Private Home/With Home Health			4.1	Occ/Freq. Incontinent of Bowel		23.9	Receiving Suctioning		0.0	
Other Nursing Homes			0.0				Receiving Ostomy Care		4.3	
Acute Care Hospitals			50.0	Mobility			Receiving Tube Feeding		4.3	
Psych. Hosp.-MR/DD Facilities			0.0	Physically Restrained		0.0	Receiving Mechanically Altered Diets		30.4	
Rehabilitation Hospitals			0.0							
Other Locations			1.4	Skin Care			Other Resident Characteristics			
Deaths			35.1	With Pressure Sores		6.5	Have Advance Directives		100.0	
Total Number of Discharges				With Rashes		2.2	Medications			
(Including Deaths)			74	Receiving Psychoactive Drugs						19.6